

<i>SERFF Tracking Number:</i>	<i>PRLF-127047732</i>	<i>State:</i>	<i>California</i>
<i>Filing Company:</i>	<i>Principal Life Insurance Company</i>	<i>State Tracking Number:</i>	<i>PF-2011-00446</i>
<i>Company Tracking Number:</i>			
<i>TOI:</i>	<i>H06 Health - Conversion</i>	<i>Sub-TOI:</i>	<i>H06.000 Health - Conversion</i>
<i>Product Name:</i>	<i>Medical Conversion Rate Filing</i>		
<i>Project Name/Number:</i>	<i>/</i>		

Filing at a Glance

Company: Principal Life Insurance Company		
Product Name: Medical Conversion Rate Filing	SERFF Tr Num: PRLF-127047732	State: California
TOI: H06 Health - Conversion	SERFF Status: Assigned	State Tr Num: PF-2011-00446
Sub-TOI: H06.000 Health - Conversion	Co Tr Num:	State Status:
Filing Type: Rate		Reviewer(s): Angela Jang, Bruce Hinze, Sai-on Sam, Ali Zaker-Shahrak, Wayne Thomas, Marina Zen, Karl Whitmarsh
	Author: Ann McCoy	Disposition Date:
	Date Submitted: 03/03/2011	Disposition Status:
Implementation Date Requested: 06/01/2011		Implementation Date:

General Information

Project Name:	Status of Filing in Domicile: Not Filed
Project Number:	Date Approved in Domicile:
Requested Filing Mode: Review & Approval	Domicile Status Comments: Not required to be filed in Iowa. California specific
Explanation for Combination/Other:	Market Type: Individual
Submission Type: New Submission	Individual Market Type: Individual
Overall Rate Impact: 6.3%	Filing Status Changed: 03/03/2011
	State Status Changed:
Deemer Date:	Created By: Ann McCoy
Submitted By: Ann McCoy	Corresponding Filing Tracking Number:
PPACA: Not PPACA-Related	
PPACA Notes: null	
Filing Description:	
Principal Life Insurance Company	
NAIC No. 332-61271	
FEIN No. 42-0127290	
RE: Conversion Rate Filing for HH1303 Policy Series (Not PPACA Related)	

We are filing a revised rate manual, along with an updated Actuarial Memorandum.

SERFF Tracking Number: PRLF-127047732 State: California
Filing Company: Principal Life Insurance Company State Tracking Number: PF-2011-00446
Company Tracking Number:
TOI: H06 Health - Conversion Sub-TOI: H06.000 Health - Conversion
Product Name: Medical Conversion Rate Filing
Project Name/Number: /

It is not PPACA related. It is a rate increase over the 2010 rates (filing number PF-2010-01014-Medical Conversion Rate Filing HH1303) of 6.3%. The filing will not be effective prior to June 1, 2011.

Please let me know if any additional information is needed for your review of this filing.

Thank you
Ann McCoy

Company and Contact

Filing Contact Information

Ann McCoy, State/Federal Compliance Analyst mccoey.ann@principal.com
711 High St. 800-986-3343 [Phone] 89658 [Ext]
K-005-E81 515-246-2491 [FAX]
Des Moines, IA 50392-0002

Filing Company Information

Principal Life Insurance Company	CoCode: 61271	State of Domicile: Iowa
711 High Street	Group Code: 332	Company Type: Life & Health
Des Moines, IA 50392-0002	Group Name:	State ID Number: 0024-0
(800) 986-3343 ext. [Phone]	FEIN Number: 42-0127290	

Filing Fees

Fee Required? No
Retaliatory? No
Fee Explanation:
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Principal Life Insurance Company	\$0.00		

SERFF Tracking Number: PRLF-127047732

Filing Company: Principal Life Insurance Company

Company Tracking Number:

TOI: H06 Health - Conversion

Product Name: Medical Conversion Rate Filing

Project Name/Number: /

State: California

State Tracking Number: PF-2011-00446

Sub-TOI: H06.000 Health - Conversion

Rate Information

Rate data applies to filing.

Filing Method: SERFF

Rate Change Type: Increase

Overall Percentage of Last Rate Revision: %

Effective Date of Last Rate Revision:

Filing Method of Last Filing:

Company Rate Information

Company Name:	Company Rate Change:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where required):	Minimum % Change (where required):	
Principal Life Insurance Company	Increase	6.300%	6.300%	\$5,426	8	\$86,126	6.300%	6.300%	
	Product Type:	HMO	PPO	EPO	POS	HSA	HDHP	FFS	Other
	Covered Lives:	0	8	0	0	0	0	0	0
	Policy Holders:	0	8	0	0	0	0	0	0

SERFF Tracking Number:	PRLF-127047732	State:	California
Filing Company:	Principal Life Insurance Company	State Tracking Number:	PF-2011-00446
Company Tracking Number:			
TOI:	H06 Health - Conversion	Sub-TOI:	H06.000 Health - Conversion
Product Name:	Medical Conversion Rate Filing		
Project Name/Number:	/		

Rate Review Details

COMPANY:

Company Name:	Principal Life Insurance Company
HHS Insurer Id:	00000
Product Names:	HH1303
Trend Factors:	

FORMS:

New Policy Forms:

Affected Forms:

Other Affected Forms:	HH1303
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REQUESTED RATE CHANGE

INFORMATION:

Change Period:	Other
Member Months:	96
Benefit Change:	None
Percent Change Requested:	Min: 6.3 Max: 6.3 Avg: 6.3

PRIOR RATE:

Total Earned Premium:	86,126.00
Total Incurred Claims:	26,825.00
Annual \$:	Min: 6.30 Max: 6.30 Avg: 6.30

REQUESTED RATE:

Projected Earned Premium:	91,552.00
Projected Incurred Claims:	29,776.00
Annual \$:	Min: 6.30 Max: 6.30 Avg: 6.30

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Product Name:	Medical Conversion Rate Filing		
Project Name/Number:	/		

Rate/Rule Schedule

Schedule Item Status:	Document Name:	Affected Form Numbers: (Separated with commas)	Rate Action:*	Rate Action Information:	Attachments
	Medical Conversion Rates	HH1303	Revised	Previous State Filing Number: Percent Rate Change Request: 6.300	HH1303 Rate Manual.pdf

2010 Conversion Rates - Area 1

For: California HH1303

AGE	Subscriber	Subscriber +1	Subscriber + 2
< 15	\$316.13	\$608.19	\$892.04
15 - 29	\$446.48	\$904.31	\$1,362.70
30 - 34	\$559.21	\$1,037.42	\$1,627.83
35 - 39	\$623.39	\$1,134.33	\$1,729.88
40 - 44	\$673.62	\$1,257.53	\$1,767.35
45 - 49	\$721.40	\$1,415.33	\$1,930.61
50 - 54	\$888.61	\$1,686.68	\$2,177.30
55 - 59	\$1,045.60	\$1,976.76	\$2,398.92
60 - 64	\$1,045.60	\$1,976.76	\$2,398.92
65 - 69	\$1,495.20	\$2,647.41	\$3,253.20
70 - 74	\$1,575.86	\$2,790.01	\$3,429.92
> 74	\$1,669.87	\$2,954.64	\$3,632.39

Subscriber: Subscriber Only

Subscriber + 1: Subscriber and 1 Dependent

Subscriber + 2: Subscriber and 2 or More Dependents

Counties included in Area 1 include: Alpine, Amador, Butte, Calaveras, Colusa, Del Norte, El Dorado, Glenn, Humboldt, Inyo, Kings, Lake, Lassen, Mendocino, Modoc, Mono, Monterey, Nevada, Placer, Plumas, San Benito, Shasta, Sierra, Siskiyou, Sutter, Tehama, Trinity, Tulare, Tuolumne, Yolo, Yuba.

02/22/2011

2010 Conversion Rates - Area 2

For: California HH1303

AGE	Subscriber	Subscriber +1	Subscriber + 2
< 15	\$285.99	\$566.38	\$883.89
15 - 29	\$389.33	\$801.36	\$1,238.79
30 - 34	\$475.37	\$911.11	\$1,487.15
35 - 39	\$523.07	\$999.40	\$1,543.81
40 - 44	\$575.22	\$1,103.65	\$1,573.36
45 - 49	\$618.83	\$1,222.88	\$1,669.75
50 - 54	\$745.27	\$1,459.75	\$1,873.75
55 - 59	\$868.93	\$1,680.14	\$1,998.09
60 - 64	\$868.93	\$1,680.14	\$1,998.09
65 - 69	\$1,341.25	\$2,392.23	\$2,995.23
70 - 74	\$1,414.51	\$2,522.24	\$3,161.23
> 74	\$1,499.59	\$2,669.67	\$3,346.44

Subscriber: Subscriber Only

Subscriber + 1: Subscriber and 1 Dependent

Subscriber + 2: Subscriber and 2 or More Dependents

Counties included in Area 2 include: Fresno, Imperial, Kern, Madera, Mariposa, Merced, Napa, Sacramento, San Joaquin, San Luis Obispo, Santa Cruz, Solano, Sonoma, Stanislaus.

02/22/2011

2010 Conversion Rates - Area 3

For: California HH1303

AGE	Subscriber	Subscriber +1	Subscriber + 2
< 15	\$296.07	\$562.05	\$888.95
15 - 29	\$396.08	\$810.41	\$1,284.05
30 - 34	\$490.66	\$941.38	\$1,502.80
35 - 39	\$538.54	\$1,025.36	\$1,554.55
40 - 44	\$590.53	\$1,125.06	\$1,623.53
45 - 49	\$637.76	\$1,198.23	\$1,694.22
50 - 54	\$768.44	\$1,426.60	\$1,893.67
55 - 59	\$893.10	\$1,636.72	\$2,024.95
60 - 64	\$893.10	\$1,636.72	\$2,024.95
65 - 69	\$1,376.09	\$2,375.21	\$3,069.19
70 - 74	\$1,450.05	\$2,501.94	\$3,236.61
> 74	\$1,535.86	\$2,645.33	\$3,423.02

Subscriber: Subscriber Only

Subscriber + 1: Subscriber and 1 Dependent

Subscriber + 2: Subscriber and 2 or More Dependents

Counties included in Area 3 include: Alameda, Contra Costa, Marin, San Francisco,
San Mateo, Santa Clara.

02/22/2011

2010 Conversion Rates - Area 4

For: California HH1303

AGE	Subscriber	Subscriber +1	Subscriber + 2
< 15	\$270.09	\$531.20	\$861.22
15 - 29	\$373.17	\$767.28	\$1,225.02
30 - 34	\$454.14	\$880.05	\$1,410.36
35 - 39	\$497.90	\$951.99	\$1,465.10
40 - 44	\$552.50	\$1,048.80	\$1,494.19
45 - 49	\$591.96	\$1,182.16	\$1,587.44
50 - 54	\$708.85	\$1,430.96	\$1,792.85
55 - 59	\$826.83	\$1,647.12	\$1,919.42
60 - 64	\$826.83	\$1,647.12	\$1,919.42
65 - 69	\$1,288.73	\$2,286.93	\$2,866.93
70 - 74	\$1,357.97	\$2,411.04	\$3,023.02
> 74	\$1,438.63	\$2,558.26	\$3,207.51

Subscriber: Subscriber Only

Subscriber + 1: Subscriber and 1 Dependent

Subscriber + 2: Subscriber and 2 or More Dependents

Counties included in Area 4 include: Orange, Santa Barbara, Ventura.

02/22/2011

2010 Conversion Rates - Area 5

For: California HH1303

AGE	Subscriber	Subscriber +1	Subscriber + 2
< 15	\$279.03	\$528.45	\$873.44
15 - 29	\$379.67	\$781.01	\$1,272.45
30 - 34	\$467.38	\$895.72	\$1,451.21
35 - 39	\$514.61	\$983.55	\$1,499.63
40 - 44	\$563.83	\$1,086.06	\$1,549.41
45 - 49	\$608.59	\$1,186.72	\$1,631.95
50 - 54	\$732.74	\$1,401.06	\$1,826.68
55 - 59	\$854.57	\$1,610.78	\$1,946.36
60 - 64	\$854.57	\$1,610.78	\$1,946.36
65 - 69	\$1,330.93	\$2,303.05	\$2,928.60
70 - 74	\$1,402.46	\$2,428.06	\$3,088.08
> 74	\$1,485.72	\$2,576.59	\$3,276.80

Subscriber: Subscriber Only

Subscriber + 1: Subscriber and 1 Dependent

Subscriber + 2: Subscriber and 2 or More Dependents

Counties included in Area 5 include: Los Angeles.

02/22/2011

2010 Conversion Rates - Area 6

For: California HH1303

AGE	Subscriber	Subscriber +1	Subscriber + 2
< 15	\$266.97	\$513.64	\$827.86
15 - 29	\$365.36	\$741.80	\$1,224.25
30 - 34	\$443.07	\$853.70	\$1,399.22
35 - 39	\$486.71	\$938.00	\$1,435.73
40 - 44	\$538.61	\$1,035.12	\$1,479.60
45 - 49	\$578.63	\$1,119.08	\$1,560.63
50 - 54	\$692.85	\$1,327.55	\$1,731.91
55 - 59	\$806.52	\$1,507.47	\$1,850.19
60 - 64	\$806.52	\$1,507.47	\$1,850.19
65 - 69	\$1,279.63	\$2,221.92	\$2,836.55
70 - 74	\$1,348.44	\$2,342.69	\$2,991.23
> 74	\$1,428.50	\$2,486.35	\$3,174.47

Subscriber: Subscriber Only

Subscriber + 1: Subscriber and 1 Dependent

Subscriber + 2: Subscriber and 2 or More Dependents

Counties included in Area 6 include: Riverside, San Bernardino, San Diego.

02/22/2011

PPO NETWORKS AVAILABLE

PHCS (Private Healthcare Systems, Inc.) – California / 04015

Counties associated with this PPO: Alameda, Alpine, Amador, Butte, Calaveras, Colusa, Contra Costa, Del Norte, El Dorado, Fresno, Glenn, Humboldt, Imperial, Inyo, Kern, Kings, Lake, Lassen, Madera, Marin, Mariposa, Mendocino, Merced, Modoc, Mono, Monterey, Napa, Nevada, Orange, Placer, Plumas, Riverside, Sacramento, San Benito, San Bernardino, San Diego, San Francisco, San Joaquin, San Luis Obispo, San Mateo, Santa Barbara, Santa Clara, Santa Cruz, Shasta, Sierra, Siskiyou, Solano, Sonoma, Stanislaus, Sutter, Tehama, Trinity, Tulare, Tuolumne, Ventura, Yolo and Yuba

PHCS (Private Healthcare Systems, Inc.) – Los Angeles / 04016

Counties associated with this PPO: Los Angeles

CALIFORNIA DEPARTMENT OF INSURANCE

FILING COVER SHEET **for** **FORMS FILINGS with the POLICY APPROVAL BUREAU**

(Suggested for use as the cover letter required by Title 10, California Code of Regulations §2205)

TO: California Department of Insurance Policy Approval Bureau 45 Fremont Street San Francisco, CA 94105	FROM: (Official Insurer Name): Principal Life Insurance Company
	Submitter and Complete Mailing Address: Ann McCoy 711 High Street Group Life and Health Compliance Des Moines, IA 50392-0002
	K-005-E81
	Submission Date: 03/03/2011

1. IDENTIFYING FORM NUMBER(S): HH1303 Medical Conversion Rate Filing

[The form number(s) of one or more of the documents submitted by which the filing can be identified.
§2205(a)]

2. DOCUMENT CLASS [The subdivision of §2202(a) which best describes the forms submitted.
§2205(b)]

<u>Generic Description and Definition Citation</u>	<u>Check Below</u>	<u>Generic Description and Definition Citation</u>	<u>Check Below</u>
"Health Insurance" [§2202(a)(1)]	X Rates	"Credit Life and Disability" [§2202(a)(6)]	
"Group and Blanket Life and Non-health Disability" [§2202(a)(2)]		"Supplemental Life Benefits" [§2202(a)(7)]	
"Individual Disability, Non-health" [§2202(a)(3)]		"Variable Life and Annuities" [§2202 (a)(8)]	
"Medicare Supplement" [§2202(a)(4)]		"Fraternal" [§2202(a)(9)]	
"Long-term Care" [§2202(a)(5)]		"Unclassified" * [§2202(a)(11)]	
* Describe briefly:			

3. GROUP AND/OR INDIVIDUAL [Are the forms group, individual or used in both contexts?
§2205(b)]

Group Only:	Individual Only: <u>XX</u>	Group AND Individual:
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4. EMPLOYER SIZE (Employer Health Insurance Only) [Where the forms submitted provide health coverage through employment, the minimum and the maximum sizes of the employers in terms of number of employees. §2205(c)]

2 to 50 Employees: XXX	Over 50 Employees:	All Employers:
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#vCopy of CVRSHEET-W.doc

5. REPLACES PREVIOUSLY-APPROVED DOCUMENT(S)? [Do any documents replace previously-approved documents. §2205(d)] **No**

6. FINAL PRINT FORM? [Whether each document is in draft, printer's proof, or the final printed form for issue to insureds. [§2205(e)]]

<u>Document(s)</u>	<u>Draft?</u>	<u>Printer's Proof?</u>	<u>Final Print?</u>
Medical Conversion Rate Filing			XXXX

7. TYPE OF DOCUMENT WITH WHICH IT WILL BE USED [For each document (such as a rider) which is designed to be used with another document not included in the filing, a statement of the document class with which it is to be used. §2205(f)]

<u>Document Form Number</u>	<u>Document Class (from Item 2, above)</u>
Medical Conversion	

8. MASTER POLICY FORM NUMBER AND APPROVAL DATE: **10-20-2005**

[Where a certificate is submitted for use with a previously approved "group" document, the form number and the filing or approval date of the previously approved group document. §2205(g)]

9. IF ABOVE INFORMATION CANNOT BE FURNISHED, EXPLAIN WHY. [If the submitter is unable to furnish the information requested above explain why §2205(h)]

10. REMARKS AND ADDITIONAL INFORMATION (Attach additional sheets as necessary):

SUBMITTER'S SIGNATURE & TITLE: Ann McCoy – Group Compliance State/Federal Legislative Analyst

cvrsheet.1

THE PRINCIPAL LIFE INSURANCE COMPANY

Actuarial Memorandum

Conversion Comprehensive Expense Policy – HH1303– California

NAIC NO. 332-61271

The purpose of this filing is to describe the rating system for Conversion Insurance Policies and certify compliance with applicable laws of the state of California and the rules of the Department of Insurance. This filing is not intended to be used for other purposes.

Principal Life Insurance Company provides conversion coverage to California persons whose coverage has terminated.

1. Description of Policy

HH1303 is a policy form offered to new sales and renewals. This plan is a health conversion PPO expense policy form. It has a \$450 deductible and 85% in-network coinsurance. There is a \$2,500/\$4,000 in-network out-of-pocket limit. These plans are available for persons age 18 and over. Coverage is also available for dependent children who are under age 19. Students from age 19 to 25 may also be covered under a family plan. A child who no longer satisfies the child eligibility provisions may convert to their own plan at adult rates. A new conversion plan is also available for a spouse whose coverage terminated because of divorce or legal separation from the insured or because of the death of the insured.

The company reserves the right to refuse to issue the plan because of overinsurance or duplication of benefits. The Company also reserves the right to refuse to renew the plan because of fraud or misrepresentation. Premiums may be changed at any premium date.

2. Determination of Rates

To be in compliance with California AB 1401, we have set our rates to be no more than the California Major Risk Managed Insurance Program rates.

3. Expected Loss Ratio

The incurred loss ratio for our Conversion block is 176.0%. This loss ratio was calculated based on incurred claims for 2010.

<u>Nationwide</u>	<u>Earned Premium Conversion</u>	<u>Group Subsidy</u>	<u>Incurred Claims</u>	<u>Gain/ Deficit</u>	<u>Loss Ratio*</u>
1/1/2010 – 12/31/2010	\$ 3,509,307	\$ 673,939	\$ 6,176,003	\$(1,992,757)	176.0%
1/1/2009 – 12/31/2009	\$ 3,854,726	\$ 771,951	\$ 5,647,763	\$(1,021,086)	146.5%
1/1/2008 - 12/31/2008	\$ 4,116,661	\$ 842,476	\$ 5,734,676	\$ (775,539)	139.3%
1/1/2007 - 12/31/2007	\$ 4,550,019	\$ 937,650	\$ 8,377,647	\$(2,889,978)	184.1%
1/1/2006 - 12/31/2006	\$ 4,848,471	\$ 6,358,802	\$ 8,483,530	\$ 2,723,743	175.0%
1/1/2005 - 12/31/2005	\$ 5,299,449	\$ 5,772,541	\$ 8,745,070	\$ 2,326,920	165.0%
1/1/2004 - 12/31/2004	\$ 5,434,210	\$ 5,548,025	\$ 8,837,812	\$ 2,144,423	162.6%
1/1/2003 - 12/31/2003	\$ 6,043,551	\$ 5,240,832	\$ 11,379,827	\$ (95,444)	188.3%
1/1/2002 - 12/31/2002	\$ 4,977,572	\$ 5,623,749	\$ 9,260,804	\$ 1,340,517	186.1%
1/1/2001 - 12/31/2001	\$ 5,245,017	\$ 5,803,972	\$ 11,055,883	\$ (6,894)	210.8%
1/1/2000 - 12/31/2000	\$ 5,643,915	\$ 3,280,940	\$ 9,836,827	\$ (911,972)	174.3%
1/1/1999 - 12/31/1999	\$ 5,879,919	\$ 3,811,858	\$ 12,534,173	\$(2,842,396)	213.2%
1/1/1998 - 12/31/1998	\$ 6,432,987	\$ 3,239,896	\$ 11,994,201	\$(2,321,318)	186.4%
1/1/1997 - 12/31/1997	\$ 5,517,178	\$ 3,787,274	\$ 9,723,176	\$ (418,724)	176.2%
1/1/1996 - 12/31/1996	\$ 6,616,022	\$ 4,822,064	\$ 10,352,320	\$ 1,085,766	156.5%
1/1/1995 - 12/31/1995	\$ 7,485,386	\$ 5,691,371	\$ 11,678,386	\$ 1,498,371	156.0%
1/1/1994 - 12/31/1994	\$ 7,903,423	\$ 5,005,211	\$ 11,741,994	\$ 1,166,640	148.6%
1/1/1993 - 12/31/1993	\$ 8,891,722	\$ 4,760,521	\$ 12,117,537	\$ 1,534,706	136.3%
1/1/1992 - 12/31/1992	\$ 9,185,912	\$ 4,321,797	\$ 13,451,253	\$ 56,456	146.4%
1/1/1991 - 12/31/1991	\$ 9,437,528	\$ 4,132,682	\$ 14,310,368	\$ (740,158)	151.6%
1/1/1990 - 12/31/1990	\$ 7,701,707	\$ 4,221,987	\$ 13,698,785	\$(1,775,091)	177.9%

*Loss Ratio does not include the subsidy received from group block.

5. Certification

To the best of my knowledge and judgment, this rate filing is in compliance with the applicable laws and regulations of the state of California and the rules of the Department of Insurance, and the benefits are reasonable in relation to the premiums charged.



Charles B. Smith, FSA, MAAA
Actuary - Pricing
Principal Life Insurance Company
Des Moines, IA 50392-5532

CALIFORNIA DOCUMENT SUBMISSION FORMSET

California Insurer Number: (NOT NAIC Number)		FOR DEPARTMENT USE ONLY		
Official Insurer Name:		Our File #	Fee Code:	
Submitter and Complete Mailing Address:		Reviewer:		
Submission Date:		Dept Action Date:		
Document Form Number	Doc Type ("Policy," etc)	Document Coverage	Department Action	Fee
1				
2				
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INSTRUCTIONS: Complete the part of the form to the left of the double vertical line. Enter one document to a numbered line. Use additional formsets if necessary. Be accurate - the copy of this form that we return to you will be your only record of our action on your submission. THIS IS NOT A BILL - DO NOT PAY. YOU WILL RECEIVE A SEPARATE FILING FEE INVOICE SHORTLY; REMIT FEES ONLY WITH THAT INVOICE.				Total \$ Cont'd on ___ pages

DSF 1.35